

ABSTRACT

INTRODUCTION

Preterm premature rupture of membranes is defined as rupture of fetal membrane before onset of labour at less than 37 completed weeks of gestation and after 28 weeks of gestation. Incidence ranges from 3-10% of all deliveries. Preterm premature rupture of membrane is one of the important causes of preterm birth can result in high perinatal morbidity and mortality.

AIM & OBJECTIVES

AIM:

To study perinatal outcome in preterm premature rupture of membrane.

OBJECTIVE:

To study risk factors associated with preterm premature rupture of membrane.

To study perinatal morbidity and mortality associated with preterm premature rupture of membrane.

To study the outcome of labour in preterm premature rupture of membrane.

MATERIALS AND METHODS

This study was conducted in ISO-KGH from may 2016-may 2017 under Madras Medical College. Institutional Ethical committee clearance was obtained from Madras Medical College.

SAMPLE SIZE:

200 patients

STUDY DESIGN:

Prospective observational study

DURATION OF STUDY:

One year

STUDY CENTRE:

Department of obstetrics and gynaecology in ISO KGH, Chennai.

INCLUSION CRITERIA:

All pregnant women with a singleton pregnancy between 28-37 weeks of gestation admitted in labour room were shifted after considering inclusion and exclusion criteria.

EXCLUSION CRITERIA:

1. Multiple pregnancy
2. Fetal growth restriction
3. Uterine anomalies
4. Foetal anomalies
5. Hypertensive disorder complicating pregnancy
6. Gestational diabetes
7. Antepartum haemorrhage (Placenta praevia, Abruptio)
8. Class 2-4 cardiac disease
9. Tumour complicating pregnancy (Fibroid, Ovarian tumour)
10. Medical disorder complicating pregnancy (Chronic hypertension, Chronic renal disease and SLE

RESULTS :

PPROM less than 32 weeks of gestation newborn had phototherapy has sensitivity of 45% and specificity of 93.3%.

PPROM less than 35 weeks of gestation in that less than 35 weeks of gestation new born had NICU admission which had 73.2% sensitivity and 77.8% specificity.

PPROM in less than 35 weeks in new born had NICU admission which had 73.2% sensitivity and 77.8% specificity. PPRM less than 35 weeks of gestation of newborn had infection with 66.7% sensitivity and 89.4% specificity .PPROM was more common in age group of less than 25 years with a incidence of 54% out of which 36% late PPRM and 10% early PPRM.

CONCLUSION

PPROM was more common in younger age group, low socio economic class and primigravidae in present study.

PPROM was not associated with previous history ,booked or un booked and previous abortion.

In present study most of newborn had better 5min apgar especially late preterm group.

Majority of neonatal morbidity was due to RDS followed by hyperbilirubinaemia then followed by sepsis.

In present study RDS was common in early preterm group and hyperbilirubinaemia common in late preterm group.

In current study most of patients delivered vaginally compared to 36% of LSCS.